



Commissioner for Patents  
Washington, DC 20231  
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Bib Data Sheet

CONFIRMATION NO. 5038

<b>SERIAL NUMBER</b> 09/469,499	<b>FILING DATE</b> 12/22/1999 <b>RULE</b>	<b>CLASS</b> XXX	<b>GROUP ART UNIT</b> 2613	<b>ATTORNEY DOCKET NO.</b> 041-1790B
<b>APPLICANTS</b> TAKAYUKI SUGAHARA, YOKOHAMA, JAPAN;				
<b>** CONTINUING DATA *****</b> This application is a DIV of 08/940,941 09/30/1997 PAT 6,212,329				
<b>** FOREIGN APPLICATIONS *****</b> JAPAN 6-47762 02/22/1994				
<b>IF REQUIRED, FOREIGN FILING LICENSE GRANTED</b> <b>** 02/03/2000</b>				
Foreign Priority claimed <input type="checkbox"/> yes <input type="checkbox"/> no 35 USC 119 (a-d) conditions <input type="checkbox"/> yes <input type="checkbox"/> no <input type="checkbox"/> Met after met Allowance Verified and Acknowledged _____ Examiner's Signature _____ Initials _____		<b>STATE OR COUNTRY</b> JAPAN	<b>SHEETS DRAWING</b> 16	<b>TOTAL CLAIMS</b> 5
<b>INDEPENDENT CLAIMS</b> 5				
<b>ADDRESS</b> Isreal Gopstein CLARK & BRODY 1750 K Street, N.W. No. 600 Washington, ,DC 20006				
<b>TITLE</b> METHOD OF PROTECTION OF DATE REPRODUCTION, AND REPRODUCTION APPARATUS PROVIDING PROTECTION OF DATA REPRODUCTION				
<b>FILING FEE RECEIVED</b> 1166	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:		<input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees ( Filing ) <input type="checkbox"/> 1.17 Fees ( Processing Ext. of time ) <input type="checkbox"/> 1.18 Fees ( Issue ) <input type="checkbox"/> Other _____ <input type="checkbox"/> Credit	

SERIAL NUMBER 09/469,499	FILING DATE 12/22/99	CLASS 348	GROUP ART UNIT 2713	ATTORNEY DOCKET NO. 041-1790B
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APPLICANT

TAKAYUKI SUGAHARA, YOKOHAMA, JAPAN.

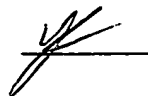
\*\*CONTINUING DOMESTIC DATA\*\*\*\*\*

VERIFIED THIS APPLN IS A DIV OF 08/940,941 09/30/97



\*\*371 (NAT'L STAGE) DATA\*\*\*\*\* *none*

VERIFIED




\*\*FOREIGN APPLICATIONS\*\*\*\*\*

VERIFIED JAPAN 6-47762 02/22/94



IF REQUIRED, FOREIGN FILING LICENSE GRANTED 02/03/00

Foreign Priority claimed 35 USC 119 (a-d) conditions met	<input checked="" type="checkbox"/> yes <input type="checkbox"/> no <input checked="" type="checkbox"/> yes <input type="checkbox"/> no <input type="checkbox"/> Met after Allowance	STATE OR COUNTRY JPX	SHEETS DRAWING 16	TOTAL CLAIMS 5	INDEPENDENT CLAIMS 5
Verified and Acknowledged  Examiner's Initials _____ Initials _____					

ADDRESS

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ALEXANDRIA VA 22314

TITLE

METHOD OF PROTECTION OF DATE REPRODUCTION, AND REPRODUCTION APPARATUS  
PROVIDING PROTECTION OF DATA REPRODUCTION

FILING FEE RECEIVED  \$916	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT NO. _____ for the following:	<input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees (Filing) <input type="checkbox"/> 1.17 Fees (Processing Ext. of time) <input type="checkbox"/> 1.18 Fees (Issue) <input type="checkbox"/> Other _____ <input type="checkbox"/> Credit _____
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